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|----------------------------|---------------------------|
| CHILD'S NAME:<br><br>_____ | CASE NUMBER:<br><br>_____ |
|----------------------------|---------------------------|

### VISITATION ATTACHMENT: GRANDPARENT

1. ☐ Anyone who appears to be under the influence of alcohol or any controlled substance will not be allowed to participate in a scheduled visitation with the child. The visitation supervisor may terminate the visit if this order is violated.
2. ☐ Matters relating to the allegations of the petition or issues related to the child's placement are not to be discussed with the child during visits except under the guidance of a counselor in a therapeutic setting. The visitation supervisor may terminate the visit if this order is violated.

3. ☐ **Contact between the child and grandparent**

a. ☐ **Contact between the child and the**

- ☐ maternal grandmother  
☐ maternal grandfather  
☐ other maternal grandparent (*specify*):

is in the best interest of the child at this time and will serve to strengthen family ties.

(1) ☐ **In-person visitation**

- (a) ☐ Unsupervised
- (b) ☐ Supervised by the  
       (i) ☐ county agency                      (ii) ☐ foster family agency  
       (iii) ☐ other (*specify*):
- (c) Frequency and duration  
       (i) ☐ times per week for a total of  hours per week  
       (ii) ☐ times per month for a total of  hours per month  
       (iii) ☐ An overnight visit ☐ every week ☐ every other week  
       (iv) ☐ Other (*specify*):
- (d) Location  
       (i) ☐ County agency visitation facility                      (ii) ☐ Foster family agency facility  
       (iii) ☐ Other (*specify*):
- (e) Transportation of the child to and from the visits will be provided by the  
       (i) ☐ county agency.                      (ii) ☐ foster family agency  
       (iii) ☐ other (*specify*):
- (f) ☐ Other orders concerning in-person visitation (*specify*):

(2) ☐ **Other types of contact permitted (*specify*):**

(3) ☐ **Contact restrictions**

The following contact between the child and the

- ☐ maternal grandmother  
☐ maternal grandfather  
☐ other maternal grandparent (*specify*):

is not in the best interest of the child at this time and the specified person is to have no such contact with the child:

- (a) ☐ In-person contact                      (c) ☐ Telephone contact  
       (b) ☐ Written communication

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| CHILD'S NAME:<br><br> | CASE NUMBER:<br><br> |
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3. b. ☐ **Contact between the child and the**

- ☐ paternal grandmother  
☐ paternal grandfather  
☐ other paternal grandparent (*specify*):

is in the best interest of the child at this time and will serve to strengthen family ties.

(1) ☐ **In-person visitation**

- (a) ☐ Unsupervised  
 (b) ☐ Supervised by the  
       (i) ☐ county agency                      (ii) ☐ foster family agency  
       (iii) ☐ other (*specify*):  
 (c) Frequency and duration  
       (i) ☐ times per week for a total of  hours per week  
       (ii) ☐ times per month for a total of  hours per month  
       (iii) ☐ An overnight visit ☐ every week ☐ every other week  
       (iv) ☐ Other (*specify*):  
 (d) Location  
       (i) ☐ County agency visitation facility                      (ii) ☐ Foster family agency facility  
       (iii) ☐ Other (*specify*):  
 (e) Transportation of the child to and from the visits will be provided by the  
       (i) ☐ county agency.                      (ii) ☐ foster family agency.  
       (iii) ☐ other (*specify*):  
 (f) ☐ Other orders concerning in-person visitation (*specify*):

(2) ☐ **Other types of contact permitted (*specify*):**(3) ☐ **Contact restrictions**

The following contact between the child and the

- ☐ paternal grandmother  
☐ paternal grandfather  
☐ other paternal grandparent (*specify*):

is not in the best interest of the child at this time and the specified person is to have no such contact with the child:

- (a) ☐ In-person contact                      (c) ☐ Telephone contact  
 (b) ☐ Written communication

4. ☐ **Other (*specify*):**